

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I declare that:

My residence, post office address and citizenship are as stated below next to my name; I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **SYSTEMS AND METHODS FOR ELECTROSURGICAL TISSUE TREATMENT IN THE PRESENCE OF ELECTRICALLY CONDUCTIVE FLUID** the specification of which X is attached hereto or was filed on as Application No. and was amended on (if applicable).

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 119
			Yes <u> </u> No <u> </u>

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date
60/096,150	August 11, 1998
60/098,122	August 27, 1998

I claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
08/795,686	February 5, 1997	<u> </u> Patented <u> X </u> Pending <u> </u> Abandoned
08/561,958	November 22, 1995	<u> X </u> Patented <u> </u> Pending <u> </u> Abandoned
		<u> </u> Patented <u> </u> Pending <u> </u> Abandoned
		<u> </u> Patented <u> </u> Pending <u> </u> Abandoned

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.


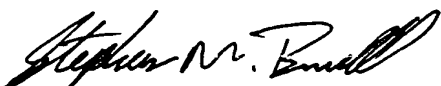

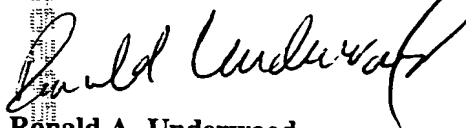
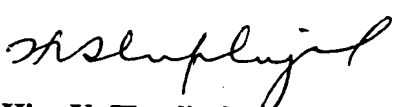
John T. Raffle, Reg. No. 38,585

Send Correspondence to: ArthroCare Corporation 595 N. Pastoria Avenue Sunnyvale, California 94086	Direct Telephone Calls to: (Name, Reg. No., Telephone No.) Name: John T. Raffle Reg. No.: 38,585 Telephone: (408) 736-0224
---	---

Full Name of Inventor 1	Last Name BAKER	First Name MICHAEL	Middle Name or Initial A.
Residence & Citizenship	City Woodside	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 145 Old La Honda Road	City Woodside	State/Country Zip Code California 94062
Full Name of Inventor 2	Last Name BRUNELL	First Name STEPHEN	Middle Name or Initial M.
Residence & Citizenship	City Mountain View	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 1915 Mt. Vernon Court, #5	City Mountain View	State/Country Zip Code California 94040
Full Name of Inventor 3	Last Name WOLOSZKO	First Name JEAN	Middle Name or Initial
Residence & Citizenship	City San Diego	State/Foreign Country California	Country of Citizenship France
Post Office Address	Post Office Address 5492 Caminito Vista Lujo	City San Diego	State/Country Zip Code California 92130
Full Name of Inventor 4	Last Name UNDERWOOD	First Name RONALD	Middle Name or Initial A.
Residence & Citizenship	City Belmont	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 2628 Sequoia Way	City Belmont	State/Country Zip Code California 94002
Full Name of Inventor 5	Last Name THAPLIYAL	First Name HIRA	Middle Name or Initial V.
Residence & Citizenship	City Los Altos	State/Foreign Country California	Country of Citizenship United States of America
Post Office Address	Post Office Address 1192 Volti Lane	City Los Altos	State/Country Zip Code California 94024


Full Name of Inventor 6	Last Name EGGERS	First Name PHILIP	Middle Name or Initial E.
Residence & Citizenship	City Dublin	State/Foreign Country Ohio	Country of Citizenship United States of America
Post Office Address	Post Office Address 5366 Reserve Drive	City Dublin	State/Country Zip Code Ohio 43017

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1  Michael A. Baker Date <u>2/9/99</u>	Signature of Inventor 2  Stephen M. Brunell Date <u>2/11/99</u>	Signature of Inventor 3  Jean Woloszko Date <u>2/9/99</u>
Signature of Inventor 4  Ronald A. Underwood Date <u>2/14/99</u>	Signature of Inventor 5  Hira V. Thapliyal Date <u>2-12-99</u>	Signature of Inventor 6 Philip E. Eggers Date

Full Name of Inventor 6	Last Name EGGERS	First Name PHILIP	Middle Name or Initial E.
Residence & Citizenship	City Dublin	State/Foreign Country Ohio	Country of Citizenship United States of America
Post Office Address	Post Office Address 5366 Reserve Drive	City Dublin	State/Country Zip Code Ohio 43017

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1 Michael A. Baker Date	Signature of Inventor 2 Stephen M. Brumell Date	Signature of Inventor 3 Jean Woloszko Date
Signature of Inventor 4 Ronald A. Underwood Date	Signature of Inventor 5 Hira V. Thapliyal Date	Signature of Inventor 6  Philip E. Eggers Date Feb 9, 1999